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If you have any comments on this draft form, you can submit them to us on our web site. Include the word DRAFT in your response. You may make comments anonymously, or you may include your name and e-mail address or phone number. We will be unable to respond to all comments due to the high volume we receive. However, we will carefully consider each suggestion. So that we can properly consider your comments, please send them to us within 30 days from the date the draft was posted.

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VOID



CORRECTED

PAYER'S name, street address, city, state, ZIP code, and telephone no.		1 Unemployment compensation	OMB No. 1545-0120 2001 Form 1099-G
		\$	
		2 State or local income tax refunds, credits, or offsets	
		\$	
PAYER'S Federal identification number	RECIPIENT'S identification number	3 Box 2 amount is for tax year	4 Federal income tax withheld
		\$	\$
RECIPIENT'S name		5 Qualified state tuition program earnings	6 Taxable grants
		\$	\$
Street address (including apt. no.)		7 Agriculture payments	8 The amount in box 2 applies to income from a trade or business <input type="checkbox"/>
		\$	
City, state, and ZIP code			
Account number (optional)			

**Certain
Government
and Qualified
State Tuition
Program
Payments**

Copy A
For
Internal Revenue
Service Center
File with Form 1096.
For Privacy Act
and Paperwork
Reduction Act
Notice, see the
2001 General
Instructions for
Forms 1099, 1098,
5498, and W-2G.

Form **1099-G**

Cat. No. 14438M

Department of the Treasury - Internal Revenue Service

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